· [ill in this information to identify your case:	· · · · · · · · · · · · · · · · · · ·
	Debtor 1 Lynne M. Troise	î.
	First Name Middle Name Last Name	A way V
	Debtor 2 Spouse, if filing) First Name Middle Name Last Name	** E
(Inited States Bankruptcy Court for the: ED District of NY	And the State of t
	Case number \$-19-06980 QS+	Check if this is an amended filing
<u> </u>	(II Allowit)	amended iiing
C	fficial Form 106Sum	
S	ummary of Your Assets and Liabilities and Certain Statistical Info	rmation 12/15
ini yo	as complete and accurate as possible. If two married people are filing together, both are equally responsible for sommation. Fill out all of your schedules first; then complete the information on this form. If you are filing amended ur original forms, you must fill out a new Summary and check the box at the top of this page.	supplying correct schedules after you file
P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	. 0
	1a. Copy line 55, Total real estate, from Schedule A/B	Ψ
	1b. Copy line 62, Total personal property, from Schedule A/B	\$ 8 500.00
		0 00
	1c. Copy line 63, Total of all property on Schedule A/B	\$\$,500
P	art 2: Summarize Your Liabilities	
		V liabilities
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	© \$
	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	a)
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$
		7
	Your total liabilities	\$
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I)	8 132,00
	Copy your combined monthly income from line 12 of Schedule I	\$ <u>8,732,00</u> \$ <u>6,840.00</u>
5.	Schedule J: Your Expenses (Official Form 106J)	. 6840.00
	Copy your monthly expenses from line 22c of Schedule J	D
		umaniment medilinika. Betinish hekanina napar menerit medilih dipilah kinasinan umah biratan ilmi 1 kin 1 k

Lynne	Mari	a Troise
Cient Name	Middle Nome	

Case number (if known) 8-19-70980 ast

	Answer These Questions for Administrative and Statistical Necolds				
6.	6. Are you filing for bankruptcy under Chapters 7, 11, or 13?				
	No. You have nothing to report on this part of the form. Check this box and submit this form	orm to the court with your oth	er schedules.		
7.	What kind of debt do you have?	Beldularisa da Culturpi en Aresenia a Turba do Carlo de Aresenia de Partido Partido (C.) En Aresenia de Aresen	os a seu mitor com esta en esta esta en esta e		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.				
	Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	of the form. Check this box	and submit		
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	come from Official	\$ 7/88.00		
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	e de primeira de la companya de la manda			
		Total claim			
	From Part 4 on Schedule E/F, copy the following:				
	9a. Domestic support obligations (Copy line 6a.)	\$	-		
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	-		
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	-		
	9d. Student loans. (Copy line 6f.)	\$	-		
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	-		
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$	-		
	9g. Total. Add lines 9a through 9f.	\$.]		

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 2 of 2

First Name Middle Name Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name Last Name Of _ N Y	70-A F. T. A.	Check if this is an amended filing
Official Form 106A/B			
Schedule A/B: Property	<i>f</i>		12/15
Do you own or have any legal or equitable interest	te and accurate as possible. If two married people re space is needed, attach a separate sheet to the er every question. Land, or Other Real Estate You Own or Have	e are filing together, bois form. On the top of a	oth are equally
No. Go to Part 2.			
Yes. Where is the property? 1.1. 2195 CAMERON AVE Street address, if available, or other description MERRICK NY 11566 City State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured classes amount of any secure Creditors Who Heve Clair Current value of the entire property? \$ 425 000 Describe the nature cinterest (such as fee	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ of your ownership simple, tenancy by
	Who has an interest in the property? Check one.	the entireties, or a lif	e estatej, ii kilowii.
County	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this its property identification number:		mmunity property
If you own or have more than one, list here:			
•	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D:
	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Land	\$	\$
City State ZIP Code	Investment property Timeshare Other Who has an interest in the property? Check one.	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
County	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other information you wish to add about this iter property identification number:		mmunity property

Official Form 106A/B

Case number (if known) 8-19-70980 Debtor 1 What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ☐ Single-family home 13 Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Current value of the Current value of the Condominium or cooperative entire property? portion you own? ☐ Manufactured or mobile home ☐ Land ☐ Investment property Describe the nature of your ownership ☐ Timeshare City ZIP Code State interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No 🛚 Yes Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.2. Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions)

Entered 02/28/19 16:55:41

Case 8-19-70980-ast

Doc 9

Filed 02/26/19

Filed 02/26/19 Case 8-19-70980-ast Doc 9 Entered 02/28/19 16:55:41 Case number (17 known) 8-19-70980 a St Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another portion you own? entire property? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Check if this is community property (see

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

instructions)

Debtor 1

3.4.

DY No

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Debtor 1

Lynne Maria Troise

Case number (if known) & 19 - 70980 ast

Do you own or have any	Do you own or have any legal or equitable interest in any of the following items?		
6. Household goods and	d furnishings		
Examples: Major applia	ances, furniture, linens, china, kitchenware		
□ No		enterconnectural de la constant de l	()
☑ Yes. Describe	Nothing of value	\$	
7. Electronics			
	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games		
☐, No		nes microsoftimme	\bigcirc
Yes. Describe	No value	\$	
8. Collectibles of value			
	d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; , or baseball card collections; other collections, memorabilia, collectibles		
Yes. Describe		\$	$\mathcal{O}_{\mathcal{O}}$
9. Equipment for sports	and hobbies	navirain necession of	
and kayaks	tographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments		
ŬVNo			
Yes. Describe		\$	
10. Firearms		ace over a constant of	
	s, shotguns, ammunition, and related equipment		<i>a</i>
Yes. Describe		\$	$\overline{}$
11. Clothes		mention in the second	
	othes, furs, leather coats, designer wear, shoes, accessories		

12. **Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

Everylon Clothing

gold, silver

No
Yes. Describe......

13. **Non-farm animals** *Examples:* Dogs, cats, birds, horses

No Liver Dogs, cats, bild

Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

Yes. Give specific information.

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$_____

\$ 500, 00

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Debtor 1

Lynne MAGIA Troise
First Name Middle Name Last Name

Case number (# known) 8-19-70980 ast

Part 4: Describe	Your Financial Assets			
Do you own or have a	ny legal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Examples: Money vo	ou have in vour wallet. in vour hor	ne, in a safe deposit box, and on hand when you fil	le vour petition	
	an mana myaar manaa, myaar na	,	o your pourse.	
∐ No Ø Yes <i>\</i>	eelly RayCho	ck, H paying things	Cash:	\$
		unts; certificates of deposit; shares in credit unions, nultiple accounts with the same institution, list each		
☐ No				chixuates
Yes		Institution name:	(Shixuates Heary PAY
	17.1. Checking account:	Dime		\$ 1,100,00
	17.2. Checking account:	chase Sisick	(Staise)	\$ <u>d, 100 · 00</u>
	17.3. Savings account:		Market 1997	\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:		Manage for a contract of the c	\$
	17.6. Other financial account:			\$
	17.7. Other financial account:			\$
	17.8. Other financial account:			\$
	17.9. Other financial account:			\$
•	Institution or issuer name:	erage firms, money market accounts		\$ \$ \$
an LLC, partnership	, and joint venture	rated and unincorporated businesses, including		
No Yes. Give specific	Name of entity:	(% of ownership: 0% %	•
information about them			0% %	\$\ \$
aren			0% %	\$

Case 8-19-70980-ast Doc 9 Filed 02/26/19 Entered 02/28/19 16:55:41 Case number (#known) 8-19-70980 ast 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

~	•	, , , ,	
□ No			
Yes. Give specific information about	Issuer name:		
them			\$
			\$
			\$
Retirement or pension			
1/	'A, ERISA, Keogh, 401(k), 403(b), thrift (savings accounts, or other pension or profit-sharing plans	
No.			\
Yes. List each account separately.	Type of account: Institution name:		and the state of t
	401(k) or similar plan:		\$
	Pension plan:		\$
			\$
			\$
			\$
			\$
	Additional account:		en inches
			<u> </u>
Your share of all unused	deposits you have made so that you ma	ay continue service or use from a company	
Your share of all unused Examples: Agreements companies, or others	deposits you have made so that you ma	ay continue service or use from a company es (electric, gas, water), telecommunications	
Your share of all unused Examples: Agreements	deposits you have made so that you ma		
Your share of all unused Examples: Agreements companies, or others	deposits you have made so that you ma	es (electric, gas, water), telecommunications	
Your share of all unused Examples: Agreements companies, or others	deposits you have made so that you ma vith landlords, prepaid rent, public utilitie Institution name or indiv	es (electric, gas, water), telecommunications	· ·
Your share of all unused Examples: Agreements companies, or others	deposits you have made so that you ma vith landlords, prepaid rent, public utilitie Institution name or indiv	es (electric, gas, water), telecommunications	\$\$
Your share of all unused Examples: Agreements companies, or others	deposits you have made so that you ma vith landlords, prepaid rent, public utilitie Institution name or indiv	es (electric, gas, water), telecommunications vidual:	\$ \$ \$
Your share of all unused Examples: Agreements companies, or others	deposits you have made so that you ma vith landlords, prepaid rent, public utilitie Institution name or indiv Electric:	es (electric, gas, water), telecommunications vidual:	\$\$ \$\$
Your share of all unused Examples: Agreements companies, or others	deposits you have made so that you ma vith landlords, prepaid rent, public utilitie Institution name or indiv Electric: Gas: Heating oil:	es (electric, gas, water), telecommunications vidual:	\$ \$ \$ \$
Your share of all unused Examples: Agreements companies, or others	deposits you have made so that you ma vith landlords, prepaid rent, public utilitie Institution name or indiv Electric: Gas: Heating oil: Security deposit on rental unit:	es (electric, gas, water), telecommunications vidual:	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others	deposits you have made so that you ma vith landlords, prepaid rent, public utilitie Institution name or indiv Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent:	es (electric, gas, water), telecommunications vidual:	\$ \$ \$ \$ \$
Your share of all unused Examples: Agreements companies, or others	deposits you have made so that you may ith landlords, prepaid rent, public utilities Institution name or individual Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone:	es (electric, gas, water), telecommunications vidual:	
Your share of all unused Examples: Agreements companies, or others	deposits you have made so that you may with landlords, prepaid rent, public utilities Institution name or individual Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water:	es (electric, gas, water), telecommunications vidual:	\$ \$ \$ \$ \$ \$
Your share of all unused Examples: Agreements companies, or others	deposits you have made so that you may with landlords, prepaid rent, public utilities. Institution name or individuals. Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture:	es (electric, gas, water), telecommunications vidual:	
Your share of all unused Examples: Agreements companies, or others No Yes	deposits you have made so that you may with landlords, prepaid rent, public utilities. Institution name or individual individual institution name or indiv	vidual:	
Your share of all unused Examples: Agreements companies, or others No Yes	deposits you have made so that you may with landlords, prepaid rent, public utilities. Institution name or individuals. Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture:	vidual:	
Your share of all unused Examples: Agreements companies, or others No Yes	deposits you have made so that you may with landlords, prepaid rent, public utilities. Institution name or individual individual institution name or indiv	vidual:	
Your share of all unused Examples: Agreements companies, or others No Yes	deposits you have made so that you may with landlords, prepaid rent, public utilities. Institution name or individual individual institution name or indiv	vidual:	\$ \$
Your share of all unused Examples: Agreements companies, or others No Yes	deposits you have made so that you may with landlords, prepaid rent, public utilities. Institution name or individual individual institution name or indiv	vidual:	
Examples: Agreements companies, or others No Yes	deposits you have made so that you may with landlords, prepaid rent, public utilities. Institution name or individual individual institution name or indiv	vidual:	\$ \$

Debtor 1

Case 8-19-70980-ast Doc 9 Filed 02/26/19 Entered 02/28/19 16:55:41 Debtor 1 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). I No ☐ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit 1 No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☑ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses I No Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you M No Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☑ No ☐ Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else D No Yes. Give specific information.....

Debtor 1 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ No ☐ Yes. Name the insurance company Surrender or refund value: Beneficiary: Company name: of each policy and list its value. ... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue D No ☐ Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No 🕰 ☐ Yes. Describe each claim..... 35. Any financial assets you did not already list D/No ☐ Yes. Give specific information.... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. Part 5: 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned D No Yes. Describe.... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices Ď No Yes. Describe....

Schedule A/B: Property

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Official Form 106A/B

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Case number ((f(known)) 8-19-70980 ast

Debtor 1 Lynne MARIA TOOISE	Case number (if known) 8-19-70980 ast
First Name Middle Name Last Name	
40. Machinery, fixtures, equipment, supplies you use in business, and tools of your t	irade
D€No.	A
Yes. Describe	\$
41. Inventory	
No years and a second contract of the second	
Yes. Describe	\$
42. Interests in partnerships or joint ventures	
12. Interests in partnerships of joint ventures	
Yes. Describe Name of entity:	% of ownership:
	% \$/
	% \$/
43. Qustomer lists, mailing lists, or other compilations	/
No	J. C. C. 404/44.0.\\ D
Yes. Do your lists include personally identifiable information (as defined in 11	U.S.C. § 101(41A))?
Yes. Describe	
	\$
44. Any business-related property you did not already list	
☑ No ☐ Yes. Give specific ☐ Yes. Give specific	
information	/ \$
	\$
	\$
	\$
	\$
	\$
45. Add the dollar value of all of your entries from Part 5, including any entries for pa for Part 5. Write that number here	
ioi Fait o. Write trat number nere	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property Y If you own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interest In.
46 De vou own or hove any legal or equitable interest in any forms or accommission	sing related property?
46. Do you own or have any legal or equitable interest in any farm- or commercial fish No. Go to Part 7.	iiig-related property:
Yes. Go to line 47.	
	Current value of the portion you own?
	Do not deduct secured claims
47. Farm animals	or exemptions.
Examples: Livestock, poultry, farm-raised fish	/
□\N ₀	
□ Yes	

	Case	e 8-19-7098	0-ast Doc 9	Filed 02/26/19	Entered 02/28/19 16	:55:41
Debtor 1	Lynne First Name	MACI Q Middle Name	TolS-e		Case number (if known) 8-19-	70980 ast
48. Crops—6	ither growing	or harvested				
⊠ No	o:	oualitation care cross-contrated entatagree-mentalistic contrate-entated at the	gyddoch i hay wechnyngo ifring fy o cynllife goli ingyriaer o berny gan eryddydd i bonniwes a binn grin	namman signisidaja-suura siimma 1902 taib iri susiibat-Vaahsiaanta 1907-susti 124 SVA-susti 124 SVA-susti 124 S		· · · · · · · · · · · · · · · · · · ·
	Give specific nation					\$
	l fishing equip	ment, implemer	its, machinery, fixture	s, and tools of trade		
₩ No						
103						\$
50. Farm and	l fishing supp	lies, chemicals,	and feed	gentuurista jäljämä johalainen ja pääs jäliymään järjen järjen ja	land (боло чуро оборалить наме менто), об отвержденняет да не в воест, име и петем учение то дов выпорация вы до том чене выбращения в дов в в достой в воест не в достой в в достой в воест не в достой в в до	anana manangan pagaman
🖾 No						
☐ Yes						de service de la constant de la cons
54 8 6	lana.	gi i a sa kecanda kuwa ngarapa canana kindada kanana sa dagai isi mengagain dan kililar isindapa	titi ka shekarina, gunur shindi ka kininin ka guzinkekin surrawa (bati zi kari tirin ini Sizuri, shintanin di Aziskeri		edity effectiveness (Antiques of Antiques (Antiques (Ant	Ψ
51. Any farm No	- and commer	ciai fishing-relat	ed property you did n	ot aiready list		
	Give specific nation					\$
52 Add the	L.	all of your entri	as from Part & includ	ing any entries for page	as you have attached	
for Part 6	. Write that n	ımber here		any entities for page		\$
Part 7:	Describe A	II Property Y	ou Own or Have	an Interest in Tha	t You Did Not List Abov	e
53 Do you h	ave other pro	perty of any kind	you did not already l	ist?		
Examples:		ountry club membe				
☐\No ☐ Yes (Give specific			meta guirroma hadas emishi kimaki	ogstock frameworder order menemene en en skalen y aktion in till blemskelmeled 2 der v. 2 2 in 400°M (order der 100°M (order 100°M (ord	\$
	ation				Manuscript unit con	\$
	- Common of the					\$
54. Add the d	ioliar value of	all of your entrie	es from Part 7. Write t	hat number here	ə	\$
Part 8:	List the To	tals of Each	Part of this Form	ı		
					<u> </u>	ů,
				.C. 566.		
56. Part 2: To	tal vehicles, li	ne 5		\$ 8. , 666 ·	_	
57. Part 3: To	tal personal a	nd household it	ems, line 15	s 500	_	
58. Part 4: To	tal financial a	ssets, line 36		\$	_	
59. Part 5: To	tal business-r	elated property,	line 45	\$	_	
60. Part 6: To	tal farm- and t	fishing-related p	roperty, line 52	\$		
61. Part 7: To	tal other prop	erty not listed, li	ne 54	+\$_	onesing	
62. Total pers	onal property	. Add lines 56 thr	ough 61	\$ 8,500	Copy personal property total =	→ + <u>\$ \$ 300 i 06</u>
					nund	
63. Total of a	Il property on	Schedule A/B. A	dd line 55 + line 62			\$ 8, 500 × 60
Official Form	106A/B		Schedule	A/B: Property		page 10

De Os (S)		Last Name Last Name District of S+		☐ Check if this is an amended filing
	fficial Form 106C chedule C: The Pro	perty You	Claim as Exempt	04/16
Be a	as complete and accurate as possible. If two many the property you listed on Schedule A/B: Proce is needed, fill out and attach to this page as riname and case number (if known).	arried people are filing to perty (Official Form 106)	ogether, both are equally responsible for s A/B) as your source, list the property that	supplying correct information. you claim as exempt. If more
spe of a retir limit	each item of property you claim as exempt, cific dollar amount as exempt. Alternatively, ny applicable statutory limit. Some exemption rement funds—may be unlimited in dollar and the exemption to a particular dollar amou	you may claim the full ons—such as those for nount. However, if you nt and the value of the	l fair market value of the property being r health aids, rights to receive certain t claim an exemption of 100% of fair ma	g exempted up to the amount penefits, and tax-exempt rket value under a law that
Pa	art 1: Identify the Property You Clain	n as Exempt		
	Which set of exemptions are you claiming? You are claiming state and federal nonbant You are claiming federal exemptions. 11 to	kruptcy exemptions. 11 J.S.C. § 522(b)(2)	U.S.C. § 522(b)(3)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description: Ka Offinal Line from Schedule A/B:	\$	\$\frac{\infty}{\infty} \frac{\infty}{\infty}	
	Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	· · · · · · · · · · · · · · · · · · ·
	Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 No Yes. Did you acquire the property covered No Yes	years after that for case	es filed on or after the date of adjustment.)	

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Debtor 1

Lynne MARICA First Name Middle Name

Case number (# known) 8 - 19 - 70 9 80 9 St

Part 2:

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$ to any applicable statutory limit	

Fill in this information to identify your case	:			
Debtor 1 Lynne Mario First Name Middle Na				
Debtor 2 (Spouse, if filing) First Name Middle Na	1			
United States Bankruptcy Court for the:	District of			
8-19-20980 00	+			
Case number (If known)			Check i	
			amende	ed filing
Official Form 106D				
	Who Have Olaines Coasses	al bar Duar		
Schedule D: Creditors	Who Have Claims Secure	a by Pro	perty	12/15
Be as complete and accurate as possible. I information. If more space is needed, copy additional pages, write your name and case 1. Do any creditors have claims secured by	, ,	ually responsible f and attach it to this	or supplying correct form. On the top of	t any
	to the court with your other schedules. You have nothi	ng else to report on	this form.	
Yes. Fill in all of the information below.	-	•		
List All Cooursed Oleima				
Part 1: List All Secured Claims		Column A	Column B	Column C
for each claim. If more than one creditor ha	ore than one secured claim, list the creditor separately s a particular claim, list the other creditors in Part 2. substical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Poritue latella	Describe the property that secures the claim:	\$ 8,000 00	\$\$	\$
Creditor's Name	7 9019	otle	cS.	
Number Street	hia offina			
	As of the date you file, the claim is: Check all that apply.	-		
	☐ Contingent ☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 onlyAt least one of the debtors and another	Judgment lien from a lawsuit			
	Other (including a right to offset)	-		
☐ Check if this claim relates to a community debt	1 2 6 0			
Date debt was incurred	Last 4 digits of account number 2 2 8 3			
	Describe the property that secures the claim:	\$	\$\$	S
Creditor's Name		deriverent (ddd)		
Number Street		mere anders		
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
	Other (including a right to offset)			
☐ Cheok if this olaim relates to a community debt				
Date debt was incurred	Last 4 digits of account number	(h.	rradio spale	get deservices (1869 a gg/s 1867 a seithe (1878 a 1888 a 1889 a 1889 a
Add the dollar value of your entries in Co	olumn A on this page. Write that number here:	s 6,000°°		en programment i service e respective e respective e respective e respective e respective e respective e respe The respective e respect

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Debtor 1

Ynne MARI a Troise
First Name Middle Name Last Name

Case number (if known) 8 - 19-70980 ast

Additional Page Part 1: After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name		-		
Number Street	-			
	- As of the date you file, the claim is: Check all that apply.	and the same of th		
	☐ Contingent			
City State ZIP Code	Unliquidated			
only State 2n State	Disputed			
11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	·			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
	Other (including a right to offset)	_		
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name	Describe the property that secures the claim.	Ψ	Ψ	Ψ
ordator o realito				
Number Street	-			
	As of the date you file, the claim is: Check all that apply.	d.		
	Contingent			
City State ZIP Code	Unliquidated			
•	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$\$	5
Creditor's Name				
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
01-1- 710 0-1-				
City State ZIP Code	Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			in the second se
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			1
- Actions one of the deplots and another	Other (including a right to offset)			
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number	y maga maga maga na ma	ı	
	s in Column A on this page. Write that number here:	\$		
If this is the last page of your form, Write that number here:	add the dollar value totals from all pages.	\$		

Ynne	mAria	Toolse	
int Name	Middle Name	Lact Name	

Case number (If known) 8-19-70980 QS+

Part 2:	List Others to	Be Notified for a	Debt That You	Already Listed
31-23-1-1-13-13-13-1-13-13-13-13-13-13-13-13	mior - 111010 10	-0 110 11110 u 101 u		, o

ag yo	ency is tryi ou have mor	ng to collect f e than one cr	rom you for a debt you owe to	someone else, list th you listed in Part 1,	ne oreditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here. If you do not have additional persons to
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			_
					_
	0.1		0.1	710.0	_
	City	operate major succión divers de confraga egan ejembro (galloco a sico	State surfaceurorento particular e estrapa acumano qual color de referen acumente particular de consente e estrapa de color e en estrapa de color en entre en en entre en en entre en en entre en en entre en entre en entre en entre en en entre en entre en entre en entre en en entre en en entre en entre en entre en entre en e	ZIP Code	
	Nama				On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			_
	****				_
	City	\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	State **Source Transfer Transfer ** Access to protect to the constitution of the constitution and the constitution are also as a cons	ZIP Code	
	Nome				On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
	***************************************				-
	City	narraiki merkemun oznamala rama merkemiste	State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
					-
	City		State	ZIP Code	-
	ander of the careful of the second survey of the second sides	ugi elektrization fan Amerika (na stand en	त्र वास्तुत् १४ वर्षा व नियम ४० जाव वास्तुत्व १४ वर्षा वास्तुत्व १४ वर्षा वास्तुत्व १४ वर्षा व स्थानित १४ वर्ष	u mee, mee oo o	On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
					-
	City		State	ZIP Code	
					On which line in Part 1 did you enter the oreditor?
	Name				Last 4 digits of account number
	Number	Street	1		
					-
-	City		State	ZIP Code	
	Phin	İ	Save As	Add Attach	ment

	Debtor 1 First Name MAY a Middle Name	S \ S \ C		
(5	Debtor 2 Spouse, if filing) First Name Middle Name	Last Name trict of		
C	Case number 8 - 19 - 70980 Ca S	.+		if this is an led filing
	fficial Form 106E/F chedule E/F: Creditors W	/ho Have Unsecured C	laims	12/15
Be Lis A/E cre nee	as complete and accurate as possible. Use Part the other party to any executory contracts or use. Property (Official Form 106A/B) and on Schededitors with partially secured claims that are listeded, copy the Part you need, fill it out, number y additional pages, write your name and case nuter that all of Your PRIORITY Unsecur	1 for creditors with PRIORITY claims and P Inexpired leases that could result in a claim. Ine G: Executory Contracts and Unexpired Lead in Schedule D: Creditors Who Have Claim. The entries in the boxes on the left. Attach the mber (if known).	art 2 for creditors with NONPRIORITY Also list executory contracts on Sch eases (Official Form 106G). Do not inc s Secured by Property. If more space	<i>edule</i> clude any is
	Do any creditors have priority unsecured claim No. Go to Part 2. Yes.			
2.	List all of your priority unsecured claims. If a creach claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the cursecured claims, fill out the Continuation Page of	a claim has both priority and nonpriority amour claims in alphabetical order according to the cre Part 1. If more than one creditor holds a particu	its, list that claim here and show both priceditor's name. If you have more than two lar claim, list the other creditors in Part 3	ority and priority
	(For an explanation of each type of claim, see the i	nstructions for this form in the instruction dookie	Total claim Priority amount	Nonpriority amount
2.1			e e	<u>.</u>
	Priority Creditor's Name	Last 4 digits of account number		
	Number Street	As of the date you file, the claim is: Check all	that apply	
		Contingent	шас арріу.	
	City State ZIP Code	☐ Unliquidated		
	Who incurred the debt? Check one.	☐ Disputed		
	Debtor 1 only	- Diopatou		
	Debtor 2 only	Type of PRIORITY unsecured claim:		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	□ Domestic support obligations		
		Taxes and certain other debts you owe the government	vernment	
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you w	ere	
	Is the claim subject to offset?	intoxicated Other. Specify		
	□ No	Other, Specify		
	Yes			
2.2	Priority Creditor's Name	Last 4 digits of account number	\$\$	S
		When was the debt incurred?		
	Number Street	As of the date you file, the claim is: Check all	that apply.	
		Contingent		
	City State ZIP Code	Unliquidated		
	Who incurred the debt? Check one.	Disputed		
	Debtor 1 only	Type of PRIORITY unsecured claim:		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Domestic support obligations		
	☐ Deptor 1 and Deptor 2 only ☐ At least one of the debtors and another	☐ Taxes and certain other debts you owe the gov	remment	
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you w	ere	
	Is the claim subject to offset? ☐ No	intoxicated Other. Specify		
	Yes		and the state of t	

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Debtor 1

Lynr	1e	Troise	
First Name	Middle Name	Last Name	

Case number ((f known) 8-19 70980 9S+

r listing any entries on this page, number them	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprio amount
	Last 4 digits of account number	\$	\$	_ \$
Priority Creditor's Name	Miles was the deltise was 10			
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	_			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
	 Claims for death or personal injury while you were intoxicated 			
☐ Check if this claim is for a community debt	Other. Specify			
s the claim subject to offset?				
☑ No ☑ Yes				
Φ_{abb} where Φ_{abb} is a support of the Φ_{abb} is the constant of all the Φ_{abb} is the support of the Φ_{abb} is the Φ_{abb} is the Φ_{abb} in Φ_{abb} in Φ_{abb} in Φ_{abb} in Φ_{abb} is the Φ_{abb} in	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	_			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	••			
Debtor 1 and Debtor 2 only	Domestic support obligations			
☐ At least one of the debtors and another	Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated Other. Specify			
Is the claim subject to offset?	_ callot. openity			
□ No				
			en e Construence de la Marie e 2000 i l'appendant de la character de la charac	n apartin alata, etwa internazionale i da rabinazi
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	• , , , , , , , , , , , , , , , , , , ,			
	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who incurred the debt? Check one.	■ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	 Claims for death or personal injury while you were intoxicated Other. Specify		THE STATE OF THE S	
s the claim subject to offset?				
☐ Yes				

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Debtor 1

Yme m Tooue

Case number (IF known) 8-19-70980 ast

art 2:	List	ΑII	of	Your	NONPRIORITY	Unsecured	Claims

2	Do any creditors have nonpriority unsecured claim	ne anainst vou?		
٥.			and the same of th	
	No. You have nothing to report in this part. Submit	this form to the o	court with your other schedules.	
	Yes			
	1 '-	almbahatiaal ar	der of the exaditor who holds each alaim. If a creditor has	more than one
4.	List all of your nonpriority unsecured claims in the	aipnabetical or	der of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not	liet claime already
	nonpriority unsecured claim, list the creditor separately	/ for each claim.	t the other creditors in Part 3.If you have more than three no	noriority unsecured
	claims fill out the Continuation Page of Part 2.	irticular claim, ils	tine other creditors in Part 3.11 you have more than three no	ilphonty unsecured
	ciains iii out the Continuation Fage of Fart 2.			
				Total claim
	1			
4.1			Last 4 digits of account number	
	Nonpriority Creditor's Name			\$
			When was the debt incurred?	
	Number Street			
	Number Street			
	01-1-1-7/10	P Code	As of the date you file, the claim is: Check all that apply.	
	City State ZIP	Code	As of the date you me, the stann is. Shook an that apply.	
			Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only			
	· · · · · · · · · · · · · · · · · · ·		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Type of NONFRIORIT unsecuted claim.	
	At least one of the debtors and another		☐ Student loans	
	☐ Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce	
	Check if this claim is for a community debt		that you did not report as priority claims	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
	□ No		Other. Specify	
	Yes			
4.2			Last 4 digits of account number	\$
			When was the debt incurred?	
	Nonpriority Creditor's Name		when was the dept mouned:	
	Number Street		B. B. C. L. C. B. C. L. C.	
			As of the date you file, the claim is: Check all that apply.	
	City State ZIP	Code	☐ Contingent	
			☐ Unliquidated	
	Who incurred the debt? Check one.		☐ Disputed	
	Debtor 1 only		Disputed	
	Debtor 2 only		- ANAMONIA DIEV.	
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		☐ Student loans	
			Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt		that you did not report as priority claims	
	1.41		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify	
	□ No		— Outon oposity	
	☐ Yes			
1.3				
7.5			Last 4 digits of account number	\$
	Nonpriority Creditor's Name		When was the debt incurred?	,
	Number Street			
			As of the date you file, the claim is: Check all that apply.	
	City State ZIP	Code	AS of the date you me, the dialin is. Offeck all that apply.	
			Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated	
	☐ Debtor 1 only		☐ Disputed	
	Debtor 2 only		- Disputed	
	Debtor 1 and Debtor 2 only		Time of MONDBIORITY understand alaims	
	At least one of the debtors and another		Type of NONPRIORITY unsecured claim:	
	At least one of the deptors and another		☐ Student loans	
	☐ Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce	
	·		that you did not report as priority claims	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
	□ No		Other. Specify	
	☐ Yes			

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Debtor 1

Lynne	m.	Troise
Circl Marca	Middle Name	Lost Namo

Case number ((F known) 8-1970980 QS+

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	er listing any entries on this page, number them beginn	ing with 4.4, followed by 4.5, and so forth.	Total claim
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	T
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code Who incurred the debt? Check one.	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Yes	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify 	
	tracycle om galvar had an de talenomenous colonomia receptor med consoleran de colonica anno colonica consoleran de colonica anno colonica ann	Last 4 digits of account number	S
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	200
	☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Yes	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	Social design of the control of the
	City State ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	9
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that	Constitution of the Consti
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	¹ Түүнүйдөн ө рөрөн
	Is the claim subject to offset? No Yes	Other. Specify	The control of the second of the control of the con

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Lynn-e First Name

Case number (#known) 8-19-70980 95+

Debtor 1

Last Name

xample, if a collection ag , then list the collection a	jency is trying to coll agency here. Similarly	ect from you, if you have	your bankruptcy, for a debt that you already listed in Parts 1 or 2. For u for a debt you owe to someone else, list the original creditor in Parts 1 or more than one creditor for any of the debts that you listed in Parts 1 or 2, list the ns to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			Line of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number Street			☐ Part 2: Creditors with Nonpriority Unsecured C
			Last 4 digits of account number
City	State	ZIP Code	
PLASATE EEC POOL PRES POR SEALESTING YN PRES PRES PRES PRES PER AN FRANCE FAN DE FRANCE FAN FRAN FRAN FRAN FRA T	inderlyste frigat i felikation (in the friend of the f		On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Clain Part 2: Creditors with Nonpriority Unsecured
		Norwania and and and a decided a decided a decided a decided and a decided a	Claims
City	State	ZIP Code	Last 4 digits of account number
on and activative consistent and the construction of the construct		ZIF Code	
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
	State	ZIP Code	Last 4 digits of account number
lame			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claim
lumber Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims
	State State	ZIP Code	Last 4 digits of account number
			On which entry in Part 1 or Part 2 did you list the original creditor?
lame			Line of (Check one): Part 1: Creditors with Priority Unsecured Claim
umber Street			☐ Part 2: Creditors with Nonpriority Unsecured
		······································	Claims
ity	State	ZIP Code	Last 4 digits of account number
	e e e e e e e e e e e e e e e e e e e		On which entry in Part 1 or Part 2 did you list the original creditor?
lame			Line of (Check one): Part 1: Creditors with Priority Unsecured Claim
lumber Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
City	State	ZIP Code	Last 4 digits of account number
protocolo de Portocolo de Andre Protocolo de Conde Político de La de La dia que Político de Acondo de Político			On which entry in Part 1 or Part 2 did you list the original creditor?
lame			Line of (Check one): Part 1: Creditors with Priority Unsecured Claim
lumber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Claims

City

ZIP Code

State

Last 4 digits of account number

Lynne	\sim	Toolse
Cimt Name	Adiddle Nome	Last Name

Case number (17 known) 8-19-70980 QS+

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims	6a. Domestic support obligations	6a. _{\$}
from Part 1	6b. Taxes and certain other debts you owe the government	6b. \$
	6c. Claims for death or personal injury while you were intoxicated	6c. \$
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + _{\$}
	6e. Total. Add lines 6a through 6d.	6e. \$
		Total claim
Total claims	6f. Student loans	6f.
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. _{\$}
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i. + _{\$}

Print

Save As...

Add Attachment

Reset

							1	
Fi	ll in this in	formation to ide	ntify your	case:				
De	ebtor .	Lynne &	nance	idle Name	Last Name			
	ebtor 2	Fustivanie						
	oouse If filing)			District of	Last Name			
		3ankruptcy Court fo						
	ise number known)	5 - (0	100			ĺ		Check if this is ar amended filing
L								amended ming
Of	ficial F	orm 1060	}					
S	chedu	ıle G: Ex	 cecuto	orv Contra	icts and	Une	expired Leases	\$ 12/15
info add	rmation. If itional pag Do you h	i more space is i ges, write your n ave any executo	needed, co ame and ca ery contract	py the additional pa ase number (if know ts or unexpired leas	age, fill it out, nu vn). ses?	ımber the	ooth are equally responsible e entries, and attach it to this u have nothing else to report or	s page. On the top of any
					-		Schedule A/B: Property (Office	
2.	List separ example, unexpired	rent, vehicle lea	on or comp se, cell ph	pany with whom you	u have the contra tions for this form	ract or lean	ase. Then state what each construction booklet for more exam	ontract or lease is for (for mples of executory contracts and
	Person o	r company with	whom you	have the contract o	or lease		State what the contract or le	ase is for
2.1								
	Name	ayay kayahin garayay ay daran daran ay an asad adan ay an asad adan ay an asad an ay an asad	,			-		
	Number	Street				-		
	City		State	ZIP Code		-		
2.2	City	THE CONTROL OF SEASON TO SEASON TO SEASON THE SEASON TH	Olale			\$\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	a ann an t-aireann br>T-aireann an t-aireann an t-aire	
4.4	Name					-		
	Number	Street			Anadrophor a processor and a consequence of the first of	-		
fresh and the state of the stat						_		
2.3	City		State	ZIP Code				
	Name					-		
	Number	Street	a de la companya de l			-		
					aglingan on gaire, mangan agug her manlian aigh e anhaid de heire an dhliain dha	_		
2.4	City		State	ZIP Code		no, agrimalis i disposationali last.		holiserikkativetelette (CV-4800,000 viineraspeletelete) – 4 parleteletikistöksteletiketäänätöötytiotiketeletik
	Name							
er Colonia de Colonia	Number	Street				-		
American State of the State of		Olloot						
2.5	City		State	ZIP Code		A APPLANT ENTRE ESTERNAMENTO		nerne vilka devikte findatatien in 1800-eanste det er een beskriver hat devikte beskriver in 1800 in 1800 ver 4 wêre det ee
۷.5	Name	neg out to a Marie out of description of the second				-		
	Number	Street						
	City		State	ZIP Code		-		

Linne	m	Troise
First Name	Middle Name	Lact Namo

Case number (If known) 8-19-70980 @ST

 _	

Additional Page if You Have More Contracts or Leases

	Person or	company w	vith whom you	have the contr	act or lease	What the contract or lease is for
2. <u>2</u>						
	Name					-
	Number	Street				-
	City	***************************************	State	ZIP Code		
2	egitentijs/ristopreser/entrelase	**C.796286006784-m.486876600286966645786			in enggrende i ne enemang producer (nemang kenang kenang kenang kenang kenang kenang kenang kenang kenang kena Penang kenang kenan	
	Name					
	Number	Street	kan ya aning ya saba da kan kan kan kan kan kan kan kan kan ka			
	City		State	ZIP Code		
2		P. T. T. P. March C. S. (1967) P.			and the second control of the second control	
	Name					•
	Number	Street		***************************************		•
	City		State	ZIP Code		
2		10. zazanio 2000 kiera (10. zazanio 2006)	nadioni ribaliki, utaritari kilosi ili kan pirintingaliki, utarihiki diselekti ili ka	a delete terreta in transferencia de la Garana de la Albadea indica en escado de Albadea.		
	Name					
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	City		State	ZIP Code		
2					POLICIO LECE 1.380786-540814-93 E FINES (PER L'INSERVE L'ES A 660-10 FINÈS E CÉTE L'IL REPORT DE COMPANION DE	
	Name					
	Number	Street				
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2			aderin egyppus – i e krede a byte de serveje ver forket indvision befolkligt fr	etankonasis eta Liste en Ropa kan suka terrepitarren eta kal-dalaren eta katuarren eta eta eta eta eta eta eta	ki telefakki edent szásításán elkeri isék indrintessésséssésséssésséssésséssésséssésséssé	
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	Name					
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	Name					
	Number	Street			nga maga ngangganggang makangga panggala at makan at gata nagkan ngahita kalina kalina kalina akat kalina kali	
va-101-127600	City		State	ZIP Code	Mary and the control of the control	
	Primi		Save	As	Add Attachm	ent

Debtor 1	Lyme	MARIA Troi	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Sankruptcy Court	for the: ED District of	1 1 1 1 to
Case number (Select and	es 8-19-70980	ast

Check if this is an amended filing

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

11-6-707-905-0-00			
	Do you have any codebtors? (If you are filing a joint case □ No □ Yes	e, do not list either spouse as	s a codebtor.)
	Within the last 8 years, have you lived in a community	proporty state or territory?	Community property states and territories include
	Arizona, California, Idaho, Louisiana, Nevada, New Mexic		` , , ,
	☑ No. Go to line 3.	o, r dono raos, roxdo, vidon	migron, and vitosonom.)
	Yes. Did your spouse, former spouse, or legal equivale	ent live with you at the time?	
	□ No	she iivo mar you at aro timo.	
	☐ Yes. In which community state or territory did you I	ive?	Fill in the name and current address of that person
	Tes. III willon community state of territory and your		This is the name and durient address of that person.
	Name of your spouse, former spouse, or legal equivalent	<u> </u>	
	Number Street	**************************************	
	City State	ZIP Code	
	City State	ZIP Code	
	shown in line 2 again as a codebtor only if that person Schedule D (Official Form 106D), Schedule E/F (Officia Schedule E/F, or Schedule G to fill out Column 2.		
	Column 1: Your codebtor		Column 2: The creditor to whom you owe the debt
			Check all schedules that apply:
3.1			Schedule D, line
	Name		Schedule E/F, line
	Number Street		
*	Number Street		☐ Schedule G, line
	City State	ZIP Code	
3.2			Cahadula D. lina
	Name		Schedule D, line
	Number Street		Schedule E/F, line
	Number Street		☐ Schedule G, line
	<u>City</u> State	ZIP Code	
3.3			Cahadula D. lina
	Name		Schedule D, line
	Number Street	- Canada (Cara Cara Cara Cara Cara Cara Cara Ca	Schedule E/F, line
	rumber Street		☐ Schedule G, line
	City State	ZIP Code	

page 1 of ____

4	nne	\sim	Troise
Fire	Namo	Middle Name	l act Nama

Case number (# known) 8-19-70980 QS4

		Additional P	age to List More Codebtors	3			
	Column	n 1: Your codel	otor		Column 2: The	e creditor to whom you owe the de	bt
3					Check all sch	edules that apply:	
<u></u>					☐ Schedule	e D, line	
	Name					E/F, line	
	Number	r Street				G, line	
	City		State Company of a company of the plant of the company of the com	ZIP Code	n men en som en senten som kommen en skrive i klemetiser i klemetiser i klemetiser i klemetiser i klemetiser i	KARING TILLIAN OR BULL AND TILLIAN STEEL SOON, TOKKEN STEEL ASSOCIATION STEEL TO THE TO THE TOTAL THE THE THE T	sage in sometime
3					C) Sabadula	D, line	
	Name					E/F, line	
	Number	Street				G, line	
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	City		State State	ZIP Code	ner in transvering geven (1, v) is a link of an end of the hands began translated through the con-	responses to the survey of the	energy (along the period)
3						D. Por	
	Name					e D, line e E/F, line	
						e G, line	
	Number	Street			- Ochedule	. O, IIIIC	
	City		State	ZIP Code			
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	Name					D, line	
						E/F, line	
	Number	Street	grapping bigger and grapping bigger bigger bigger and a base of the contract and the contra	e arang ang ang ang ang ang ang ang ang ang	☐ Schedule	G, line	
3.	City	anna del Paul Laure i sul e lei Claud sentelle a del rel e les cade et au des la communication de les cades de	State	ZIP Code		angi yana diginina angal gitagiggan iyana, itti an yaki anameni asalahara anameni mada anamenina di mola etti angalahara ina etti a titi at etti an etti anameni aname	
	Name				☐ Schedule	D, line	
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	Number	Street			Schedule	G, line	
	City		State	ZIP Code	tere si-mystopropy (siemestanestationers) operat –more singvisio, socialestationers 170 et al.	BOOKEN STANDER	Name (production)
2					☐ Schedule	D, line	
	Name				☐ Schedule	E/F, line	* 117 Mag(C)(15
	Number	Street			☐ Schedule	G, line	di con di
							900
	City		State	ZIP Code	errer cite andrej cystema er e o'r eoleranig rain calcalaid, gan stad a ribbben calcal	politication was a classe for the part or common control to the control of the co	
3					☐ Schedule	D, line	600
	Name					E/F, line	200
	Number	Street			Schedule	G, line	500
	City		State	ZIP Code	**************************************	envitor desenvinger, ymegalini sachneri, vich acidach sach sach sach sach de Orbadisch desposition om Victoria School de Section de Constitution de Constituti	ALCO COMPANY AND
لــــــــــــــــــــــــــــــــــــــ					☐ Schedule	D, line	4
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	Number	Street				G, line	A transconden
	, TOTTING!	Ododi				***************************************	WAS CHIEF OF THE PARTY OF THE P
corum vingan	City	ng manganilan saganah da harrang manganilan	State	ZIP Code			NET CONTRACTOR AND A SECOND CONTRACTOR ASSECTATION ASS
	įĐγi	na)	Save As	Add Attachment		Reset	

Official Form 106H

Calandula M. Vaus Cadabias

page ___ of ___

Fill in this information to identif	y your case:					
Debtor 1 Lyinne MA	ria Troise					
First Name Debtor 2	Middle Name	Last Name				
(Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the Case number $\frac{4-19}{209}$	ED District of _	10-7				
Case number 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	100 CD1	_		Check i	f this is: imended filing	
<u> </u>			***************************************	☐ A su	pplement showing pos me as of the following	
Official Form 106I	_			MM /	DD / YYYY	
Schedule I: Yo	ur Income					12/15
Be as complete and accurate as a supplying correct information. If If you are separated and your sposeparate sheet to this form. On the Part 1: Describe Employ	you are married and not fouse is not filing with youne top of any additional page.	iling jointly, and y , do not include in	our sp forma	ouse is living with	n you, include informatio oouse. If more space is	on about your spous needed, attach a
Fill in your employment information.		Debtor 1			Debtor 2 or non-	filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employ	yed	and a transfer and make the same resources to the same and the same an	Employed Not employed	Security and the second security of the security of the second second second security of the second seco
Include part-time, seasonal, or self-employed work.	Occupation	Joh La	sS		Nicolia Tr	ansit Mix
Occupation may include student or homemaker, if it applies.	Cecupation					
	Employer's name	Shirte			PO-BOX	1665
	Employer's address	Number Street	w	em Aue	Pabylon Number (Street	NY
		1, ,		\ <u>\</u>	_	11107
		<u>Union</u> d	ale	M 11566	_	
		City	Stat	e ZIP Code	City	State ZIP Code
	How long employed th	ere?	-		_ \ \	
Part 2: Give Details Abou	ıt Monthly Income					
Estimate monthly income as c spouse unless you are separate		rm. If you have noth	ing to	report for any line,	write \$0 in the space. Inc	ude your non-filing
If you or your non-filing spouse I below. If you need more space,	nave more than one employ		ormati	on for all employers	for that person on the lin	es
				For Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sa deductions). If not paid monthly			2.		s G, 188	3
3. Estimate and list monthly over	ertime pay.		3.	+\$	+ \$ 1,000	.
4. Calculate gross income. Add	line 2 + line 3.		4.	\$	\$ 7,188.	

Official Form 106I Schedule I: Your Income page 1

Lynne	maria	Troise	
First Name	Middle Name	Last Name	

Case number (if known) 8 - 19 709 80 a Si

			For Debtor 1	For Debtor 2 or non-filing spouse
C	opy line 4 here tyme may	→ 4.	\$	\$ <u>7188</u>
5. Li :	st all payroll deductions:			
5	a. Tax, Medicare, and Social Security deductions	5a.	\$	\$ 420
5	b. Mandatory contributions for retirement plans	5b.		\$
5	c. Voluntary contributions for retirement plans	5c.	\$	\$
5	d. Required repayments of retirement fund loans	5d.	\$	\$
5	ie. Insurance	5e.	\$	\$
5	if. Domestic support obligations	5f.	\$	\$ 9.0.00
_	g. Union dues	5g.	\$	\$
	h. Other deductions, Specify:	5g. 5h.	+\$	+ \$ 16.00
			T \$	
b. Р	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	\$ 556.00
7. C	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	\$6,632,00
8. L i	ist all other income regularly received:			
8	 Net income from rental property and from operating a business, profession, or farm 			
	Attach a statement for each property and business showing gross			\bigcirc
	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	\$
8	b. Interest and dividends	8b.	\$	s
8	c. Family support payments that you, a non-filing spouse, or a depende	nt		
	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$
8	d. Unemployment compensation	8d.	\$	\$
8	e. Social Security	8e.	\$	\$ 2, 100.00
8	if. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistan that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$	\$
8	g. Pension or retirement income	8g.	, 🔾	\$ (7)
	•		+s 🛡	± 5 ()
	h. Other monthly income. Specify:dd all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	8h. 9.	\$	\$2,100'
	Iculate monthly income. Add line 7 + line 9. Id the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	+ \$\frac{8}{3}\frac{3}{3}\frac{10}{0} = \$\frac{8}{3}\frac{3}{3}\frac{10}{0}\$
Ind	ate all other regular contributions to the expenses that you list in Sched clude contributions from an unmarried partner, members of your household, yends or relatives.			mmates, and other
Do	o not include any amounts already included in lines 2-10 or amounts that are i	not av	ailable to pay exper	ises listed in Schedule J.
Sp	ecify:			11. + \$
	Id the amount in the last column of line 10 to the amount in line 11. The rite that amount on the Summary of Your Assets and Liabilities and Certain S.			la N 1 7/11
Ç	o you expect an increase or decrease within the year after you file this form. No. Yes. Explain:	orm?		monthly income

Debtor 1 Debtor 2 (Spouse, if filling) United States Bankruptcy Court for the: Case number (If known)	Middle Name Last Name Middle Name Last Name District of	A supplexpen	ended filing	g postpetition chapter 13 lowing date:
Official Form 106J	_			
Schedule J: Yo	ur Expenses			12/15
	ossible. If two married people are fill ed, attach another sheet to this form			
Part 1: Describe Your Hou	sehold			
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a s	separate household?			
☐ No☐ Yes. Debtor 2 must file	e Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	₩No	Dependent's relationship to	Depende	nt's Does dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
Do not state the dependents'				□ No - □ Yes
names.				☐ No
				Yes
				U No □ Yes
				☐ No
		***************************************	where the second	☐ Yes
			****	No No
	ocarrimanos as recursos de como de activo recursos as anticos como de activo			Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	No Yes			
Part 2: Estimate Your Ongoi	ng Monthly Expenses			
	bankruptcy filing date unless you a kruptcy is filed. If this is a suppleme	_		
•	-cash government assistance if you lit on Schedule I: Your Income (Offi		Your	expenses
	expenses for your residence. Include	·	4. \$ <u>(d)</u>	,500 .00
If not included in line 4:				. 6
4a. Real estate taxes			4a. \$\	100,00
4b. Property, homeowner's, or re	enter's insurance		4b. \$	H00.00
4c. Home maintenance, repair, a	and upkeep expenses		4c. \$	300.00
4d Homeowner's association or	condominium dues		4d. \$	\circ

Debtor 1 Lynne Maria Troise
First Name Middle Name Last Name

Case number (# known) 8-19-76980 ast

			Yo	our expenses
			\$	
5.	Additional mortgage payments for your residence, such as home equity loans	5.		
6.	Utilities:			Fan as
	6a. Electricity, heat, natural gas → ○ ἱ ໄ	6a.	\$	500.00
	6b. Water, sewer, garbage collection	6b.	\$	180,00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	400,00
	6d. Other. Specify:	6d.	\$	
7.	Food and housekeeping supplies	7.	\$	300.00
8.	Childcare and children's education costs	8.	\$	
9.	Clothing, laundry, and dry cleaning	9.	\$	0
10.	Personal care products and services	10.	\$	<u> 30-00</u>
11.	Medical and dental expenses	11.	\$	1 60,06
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	60.06
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	<u> </u>
14.	Charitable contributions and religious donations	14.	\$	<i>O</i>
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0
	15b. Health insurance	15b.	\$	0
	15c. Vehicle insurance	15c.	\$	500,00
	15d. Other insurance. Specify:	15d.	\$	0
	Taxaa Da aat inglude taxaa deducted from your new or included in lines 4 or 20			
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	450,00
17.	Installment or lease payments:			٨
	17a. Car payments for Vehicle 1	17a.	\$	<u> </u>
	17b. Car payments for Vehicle 2	17b.	\$	<u>6</u>
	17c. Other. Specify:	17c.	\$	<u> </u>
	17d. Other. Specify:	17d.	\$	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ie.		0
	20a. Mortgages on other property	20a.	\$	8
	20b. Real estate taxes	20b.	\$	<u>ŏ</u>
	20c. Property, homeowner's, or renter's insurance	20c.	\$	<u> </u>
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	$\frac{\mathcal{C}}{\mathcal{C}}$
	20e. Homeowner's association or condominium dues	20e.	\$	<u> </u>

Debto	or 1	Lynne Maria Troise Case number (if known) 8 -	19-70980 ast
		First Name — Middle Name Last Name		
21. (Other. Sp	pecify:	21.	+\$
22. C	alculate	your monthly expenses.		
2	2a. Add	lines 4 through 21.	22a.	\$ 6,840.00
2	2b. Cop	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$
2	2c. Add	ine 22a and 22b. The result is your monthly expenses.	22c.	\$6,840,00
23. C a		your monthly net income.		\$ 8732.00
23	a. Cop	y line 12 (your combined monthly income) from Schedule I.	23a.	*
23	b. Cop	y your monthly expenses from line 22c above.	23b.	-s 6840.00
23		ract your monthly expenses from your monthly income. result is your monthly net income.	23c.	\$ 1892,00
24. D e	o you ex	pect an increase or decrease in your expenses within the year after you file this form?	•	
		le, do you expect to finish paying for your car loan within the year or do you expect your payment to increase or decrease because of a modification to the terms of your mortgage?		
	No.		and an administrative of the Conference of the C	and to compromise the continue many contributions to the contribution of the contribut
	Yes.	Explain here:		
			w. A < T co.; A Debloration of the Charlest Pro-	kuptur senemengan garu pasu ku si senemi Si senemen dalah disebuah si salah titapun pangan pangan pangan ku si Kuptur senemengan garupa ku si senemi Si senemen dalah disebuah si salah titapun pangan pangan pangan pangan s

Official Form 106J

Schedule J: Your Expenses

page 3

Serve Ac Add Afferdance

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in this information to identify your case:		
tor1 Lynne maria T	TKOISE	
tor 2		
use, if filing) First Name Middle Name	Last Name	
ed States Bankruptcy Court for the CO 1 C	District of	
e number 0-14-164 80 and		Check if this
		amended filir
Official Form 106Dec		
eclaration About a	an Individual Debtor's Schedules	12/
wo married people are filing together, both	n are equally responsible for supplying correct information.	
	nkruptcy schedules or amended schedules. Making a false statement, concealing	property, or
taining money or property by fraud in cont	nection with a bankruptcy case can result in fines up to \$250,000, or imprisonme	116 101 ap to 2
otaining money or property by fraud in conr ars, or both. 18 U.S.C. §§ 152, 1341, 1519, a	nection with a bankruptcy case can result in fines up to \$260,000, or imprisonme and 3571.	int for up to 2
		ne for up to 2
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ars, or both. 18 U.S.C. §§ 152, 1341, 1519, a		nt 101 up to 2
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ars, or both. 18 U.S.C. §§ 152, 1341, 1519, a		
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ars, or both. 18 U.S.C. §§ 152, 1341, 1519, a	and 3571.	
Sign Below Did you pay or agree to pay someone who	o is NOT an attorney to help you fill out bankruptcy forms?	
Sign Below Did you pay or agree to pay someone who	o is NOT an attorney to help you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration	
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Sign Below Did you pay or agree to pay someone who Yes. Name of person	o is NOT an attorney to help you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration Signature (Official Form 119).	
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Declaration About an Individual Debtor's Schedules

Official Form 106Dec

Print Save As Add Attachment

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